

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 69 OF 181

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Johnson, Rodger, K., Mr.,

Mailing Address 910 N Houston St

City
Bullard

State
TX

Zip Code
75757-5128

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York Life

Occupation (for Individual)
Agent Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 10 / 2020

Transaction ID : 17731984

Amount of Each Receipt this Period

84.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Carothers, Matthew, R., Mr.,

Mailing Address 4800 E 300 S

City
Columbus

State
IN

Zip Code
47201-9670

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Northwestern Mutual Financial Network

Occupation (for Individual)
Financial Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 10 / 2020

Transaction ID : 17732004

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Goodrich, James, R., Mr.,

Mailing Address 1860 Beech Ave

City
Mt Pleasant

State
MI

Zip Code
48858-1280

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Northwestern Mutual

Occupation (for Individual)
Agent Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

357.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 10 / 2020

Transaction ID : 17732015

Amount of Each Receipt this Period

51.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00